burst. This was followed by profuse hemorrhage, and the expulsion of the fœtus. The placenta was found to be nearly bloodless. In consequence of the severe pain experienced in removing the placenta, the patient was placed under the influence of chloroform. It was quite successful, and she is doing well.—*Lancet*, Nov. 4, 1848.

76. *Quinine as prophylactic of Puerperal Fever.*—The idea that quinine is preservative against puerperal fever was started by M. Alphonse Leroy, of Rouen, in 1793. M. Leudet put it to the test in an epidemic which occurred in 1843, and lasted for three months, administering it before the accustomed period of the first appearance of the malady. For this purpose he employed the quinine in 15 grain (one gramme) doses, and in the few cases it was then tried in no fever followed. He repeated his experiments in two other epidemics, occurring in the years 1845 and 1846, when he found that those submitted to this medicine did not contract the fever. To give the statistics:—Of 83 women who entered the Hotel Dieu de Rouen, between September, 1843, and January, 1844, 74 took no medicine, and 21 of them were seized with puerperal fever, whilst the remaining nine were dosed with the quinine, and escaped contagion. Again: between July 8th and August 9th, 1845, 26 deliveries occurred: 11 women were submitted to no medication, and eight of them were attacked with the epidemic fever; of the 15 others treated with sulphate of quinine, one only caught the disease. Lastly, between the 9th of March and the 21st of April, 1846, 36 women were delivered: of the 19 who took no quinine, 11 were attacked; of the 16 submitted to its action, only one was seized with fever.

The following is the manner in which M. Leudet employs the quinine:—As soon as the newly delivered woman has a little recovered the shock of the childbirth—viz., in about four hours after delivery, 15 grains of the medicine are given in the course of the 24 hours, in three portions. The same quantity is prescribed the next day, but on the third day it is diminished to ten grains, and the same dose is persevered in until the usual period of the accession of the fever has passed by, up to about the sixth day. The occurrence of milk fever is not always an indication to stay the quinine, for in very many cases that febrile disturbance is very slight.

The plan of using quinine as a prophylactic has been subsequently adopted in Paris by M. Cazeaux, who could, from his experience, however, make no report of its efficacy. Nevertheless, any remedy holding out such a promise, in so fearful a disease, should not be thrown aside until after a careful and repeated trial. On the other hand, hygienic measures must be looked upon as by far the best safeguards, both against the development and the propagation of puerperal fever. *Lancet*, Oct. 7, 1848.

77. *Medicated Pessaries.* By Dr. Simpson. (Proceedings of Edinburgh Obstetric Society.)—In diseased states of the cervix uteri and vagina, medicinal substances had been applied locally to those parts under various forms, but principally, either in a solid state (as nitrate of silver, potassa, &c.), or in a liquid form (as in the great varieties of medicated injections in common use in leucorrhœa, &c.) When thus used, the local application was temporary, and applied for a few minutes only. But in various forms of disease it seemed an indication of no small importance to have the medicated substance applied continuously, and not temporarily. Medicated pessaries, which Dr. Simpson had first introduced into practice several years ago, and which had since been extensively adopted by various practitioners in London and elsewhere (see description of them published by Dr. Stafford Lee, Dr. Oldham, &c.), enabled us to fulfil this indication. By their use, for instance, we could keep the cervix uteri, when ulcerated and indurated, constantly embedded in mercurial or iodine ointment for weeks, and sometimes with the most marked benefit and success. They fulfilled another indication in cases of irritation and inflammation of the mucous membrane of the cervix uteri and vagina. They kept the opposed diseased surfaces from coming in contact, and it was well known how important a matter this was in the pathology of mucous and cutaneous surfaces.

Dr. Simpson had been in the habit of applying a variety of substances in the

form of medicated pessaries, particularly zinc and lead ointment, &c., as simple emollients; mercury and iodine as discutients (and particularly the iodide of lead); tannin, alum, and catechu, as astringents; opium, belladonna, &c., as anodynes. The pessaries were made of the size of walnuts, and could be easily introduced by the patients themselves; one or two in the twenty-four hours. They were composed of the medicine used, mixed up in the form of an ointment, and brought to a requisite degree of consistence with one or two drachms of yellow wax to the ounce of ointment. Messrs. Duncan and Flockhart, druggists, had found the following proportions requisite in the subjoined forms, (those in most frequent use in Edinburgh;) and they might serve as models for the others. After being made up in the proper form, they were usually coated by the druggists with a firmer covering, by dipping them into an ointment made up with wax and resin, kept liquid by heat. About an ounce of the different ointments made four balls.

1. *Zinc Pessaries.*—℞ Oxydi zinci ʒj; Ceræ albæ ʒj; Axungiæ ʒvj. Misce, et divide in pessos quatuor.
2. *Lead Pessaries*—℞ Acet. plumbi. ʒss; Ceræ albæ ʒiss; Axungiæ ʒvj. Misce.
3. *Mercurial Pessaries.*—℞ Unguent. hydrarg. fort. ʒij; Ceræ flavæ ʒij; Axungiæ ʒss. Misce.
4. *Iodide of Lead Pessaries.*—℞ Iodidi plumbi. ℈j; Ceræ flavæ ℈v; Axungiæ ʒvj. Misce.
5. *Tannin Pessaries.*—℞ Tanninæ ℈ij; Ceræ albæ ℈v; Axungiæ ʒvj. Misce.
6. *Alum and Catechu Pessaries.*—℞ Sulph. aluminis ʒj; Pulv. catechu ʒj; Ceræ flavæ ʒi; Axungiæ ʒvss. Misce.
7. *Belladonna Pessaries.*—℞ Extr. belladonnæ ℈ij; Ceræ flavæ ʒiss; Axungiæ ʒvi. Misce.—*Month. Journ. and Ret. Med. &c.*, June 1848.

78. *Plaster Belt in Abdominal Tumours.* By Dr. Simpson. (Proceedings of Edinburgh Obstetric Society).—Dr. Simpson stated, that patients affected with pediculated ovarian tumours, large fibrous tumours of the uterus, &c., often suffered from the morbid masses being loose and mobile, and impinging on the bladder, &c., in different positions of the body. Patients sometimes instinctively applied their hands to the tumours, under such circumstances, to steady and fix them. In these cases different means had been tried, with the view of preventing the tumours rolling and moving—such as various bandages, air-pads of Mackintosh cloth, &c. The best and simplest means, however, consisted in surrounding the whole trunk with a continuous belt of lambskin or chamois leather, eight or ten inches deep, and shaped and sewed so as carefully and exactly to fit the loins and lower part of the abdomen of the patient, like a common abdominal bandage, and embossed in front so as to contain and include, as in a bowl or cup, the protuberant portion or portions of the tumour. To fix the belt, its interior was spread with a plaster composed of one part of adhesive to two parts of soap plaster. It generally gave the patient much relief; abated the feelings of abdominal weight and pressure and pain in the back; held the tumour steady; and could be applied so as even to compress it. In other cases where no tumours were present, but the abdominal parietes and contents were relaxed, or the spine weak, the same form of plaster often afforded a great degree of comfort and relief, and enabled patients to take exercise, &c., when, otherwise, they could not without fatigue and suffering. They generally required to be removed and renewed every four or six weeks.—*Ibid.*

79. *Employment of Chloroform in Midwifery.*—Dr. Simpson gave a long report and detailed communication on the employment of chloroform in midwifery, stating that he had used it constantly, and with the best results, in his own practice since November; mentioning the rules required to be attended to in its exhibition; answering the supposed objections to its use, &c. &c. He read numerous communications and reports regarding its employment, from Dr. Grigor of Nairn, Professor Dyce of Aberdeen, Mr. Lawrence of Montrose, Dr. Paton of Dundee, Dr. Anderson of Glasgow, &c. &c., showing that a great number of persons had been already successfully delivered without pain or suffering under the use of chloroform during the last six months.

Drs. Moir, Malcolm, Leith, Carmichael, &c., stated to the Society, some verbally,